

VIRGINIA OFFICE OF EMERGENCY MEDICAL SERVICES STATE STRATEGIC AND OPERATIONAL PLAN



2017 – 2019

VIRGINIA OFFICE OF EMS STATE STRATEGIC AND OPERATIONAL PLAN
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INTRODUCTION

Section 32.1-111.3 of the Code of Virginia requires the development of a comprehensive, coordinated, statewide emergency medical services plan by the Virginia Office of EMS (OEMS) which shall incorporate, but not be limited to, the plans prepared by the regional emergency medical services councils. The Board of Health must review, update, and publish the plan triennially, making such revisions as may be necessary to improve the effectiveness and efficiency of the Commonwealth's emergency care system. The objectives of the plan shall include, but not be limited to the nineteen objectives outlined in Section 32.1-111.3.

Over the past few years, much attention has been paid to the development of the plan. Some of this is due to review reports, namely the Joint Legislative Audit and Review Commission (JLARC), and the Institute of Medicine (IOM) Report "EMS at the Crossroads". The recommendations made in these documents have assisted in driving the planning process forward.

As the Code of Virginia mandates, this plan must be reviewed, updated, and published triennially by the Board of Health. The Office of EMS appreciates the opportunity to present this document to the Board, and values any input that the Board provides, as well as the input of any other stakeholder, or interested party. Additionally, OEMS is prepared to report on the progress of the plan to the Board of Health or other interested parties upon request, and through the OEMS Annual Reports, and Service Area Plans as required by VDH, and the Code of Virginia.

This operational plan identifies the specific initiatives required of the OEMS staff in executing the 2017 – 2019 Strategic Plan. Each objective and action step is intended to accomplish those items most critical to the Strategic Plan in the given fiscal year. The Strategic Plan is designed to improve priority areas of performance and initiate new programs. Therefore, much of the routine, but important work of the OEMS staff is not included in the Operational Plan.

No later than three (3) months prior to the end of each fiscal year the OEMS staff will evaluate progress on the plan and begin the process of creating the Operational Plan for the next fiscal year.

In most cases "accountability" should be the name of a person, division, or entity that has the lead responsibility for the implementation of the objective or action step. The plan will be reviewed quarterly, and only those objectives and items relevant to the time frame will be a part of the review. Any changes in the objective or action steps should be noted in writing on the form at that time.

Definitions of acronyms included in the plan can be found on **pages 5 and 6**.

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Virginia Office of Emergency Medical Services Mission Statement

To reduce death and disability resulting from sudden or serious injury and illness in the Commonwealth through planning and development of a comprehensive, coordinated statewide EMS system; and provision of other technical assistance and support to enable the EMS community to provide the highest quality emergency medical care possible to those in need.

Virginia Office of Emergency Medical Services Vision Statement

To establish a unified, comprehensive and effective EMS system for the Commonwealth of Virginia that provides for the health and safety of its citizens and visitors.

What is the Emergency Medical Services system in Virginia?

The Virginia Emergency Medical Services (EMS) system is very large and complex, involving a wide variety of EMS agencies and personnel, including volunteer and career providers functioning in volunteer rescue squads, municipal fire departments, commercial ambulance services, hospitals, and a number of other settings to enable the EMS community to provide the highest quality emergency medical care possible to those in need. Every person living in or traveling through the state is a potential recipient of emergency medical care.

The Virginia Department of Health, Office of Emergency Medical Service (OEMS) is responsible for development of an efficient and effective statewide EMS system. The EMS System in Virginia is designed to respond to any and all situations where emergency medical care is necessary. This is accomplished through a coordinated system of over 35,000 trained, prepared and certified providers, nearly 4,500 permitted EMS vehicles, and over 680 licensed EMS agencies, to provide ground and air emergency medical care to all people in the Commonwealth of Virginia.

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Appendix A - Glossary of Commonly Used Acronyms

AEMS	Atlantic EMS Council (PA, WV, NJ, DE, MD, VA, DC, NC)
AHA	American Heart Association
AMS	Air Medical Services
COOP	Continuity Of Operations Plan
DGS	Virginia Department of General Services
DBDHS	Department of Behavioral Health and Developmental Services
DW	VDH Data Warehouse
EMSC	EMS For Children
FARC	Financial Assistance Review Committee (Subcommittee of state EMS Advisory Board)
FCC	Federal Communications Commission
FICEMS	Federal Interagency Committee on EMS
HMERT	Health and Medical Emergency Response Team
LZ	Landing Zone
MCI	Mass Casualty Incident
MDC	Medical Direction Committee (Subcommittee of state EMS Advisory Board)
NASEMSO	National Association of State EMS Officials
NEMSIS	National EMS Information System
NFFF	National Fallen Firefighters Foundation
OEMS	Virginia Office of EMS
OMD	Operational Medical Director
OMHHE	Virginia Office of Minority Health and Health Equity
PDC	Professional Development Committee (Subcommittee of state EMS Advisory Board)
PSAP	Public Service Answering Point
PSHS	Secretary of Public Safety and Homeland Security
RC	Virginia's Regional EMS Councils
RSAP	Rescue Squad Assistance Fund
TCC	Training and Certification Committee
TSO&MC	Trauma System Oversight and Management Committee (Subcommittee of state EMS Advisory Board)
VAGEMSA	Virginia Association of Governmental EMS Administrators
VAVRS	Virginia Association of Volunteer Rescue Squads
VDEM	Virginia Department of Emergency Management
VDFP	Virginia Department of Fire Programs
VDH	Virginia Department of Health
VFCA	Virginia Fire Chiefs Association

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Appendix A - Glossary of Commonly Used Acronyms (Cont.)

VHAC	Virginia Heart Attack Coalition
VHHA	Virginia Hospital and Healthcare Association
VPFF	Virginia Professional Firefighters
VPHIB	Virginia Pre Hospital Information Bridge
VSP	Virginia State Police
VSTR	Virginia State Trauma Registry
WDC	Workforce Development Committee (Subcommittee of state EMS Advisory Board)

Appendix B – Planning Strategy Matrix

Strategic Initiative 1.1- Promote Collaborative Approaches			
	Objectives	Accountability	Action Steps
Core Strategy 1: Develop Partnerships	1.1.1 Use technology to provide accurate and timely communication within the Virginia EMS System	OEMS, Regional EMS Councils (RC)	1.1.1.1 Track and report on amount, and general content of material posted to OEMS and Regional EMS Council websites and social media on a monthly and quarterly basis.
	1.1.2 Promote collaborative activities between local government, EMS agencies, hospitals, and increase recruitment and retention of certified EMS providers.	OEMS, System stakeholders	1.1.2.1. Develop method to measure the number of new EMS providers recruited via recruitment and retention programs and activities. 1.1.2.2. Revise “Keeping The Best!” programs for online access. 1.1.2.3. Maintain informational items regarding benefits and incentives for local governments to provide to volunteer fire and EMS providers. 1.1.2.4. Educate and familiarize local government officials on the importance in taking a greater role in EMS planning and coordination.
	1.1.3 Provide a platform for clear, accurate, and concise information sharing and improved interagency communications between the OEMS, state agencies and EMS system stakeholders in Virginia.	OEMS, Virginia Department of Emergency Management (VDEM), Secretary of Public Safety and Homeland Security (PSHS), Virginia State Police (VSP), Virginia Department of Fire Programs (VD FP), RC, System Stakeholders.	1.1.3.1. Encourage agencies and providers to visit OEMS web page regularly, subscribe to OEMS e-mail list, and access OEMS social media sites. 1.1.3.2. Encourage stakeholder use of OEMS Provider and Agency Portals.

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Strategic Initiative 1.1- Promote Collaborative Approaches (Cont.)			
	Objectives	Accountability	Action Steps
Core Strategy 1: Develop Partnerships	1.1.4 Identify resources and/or opportunities to work collaboratively with other state agencies, organizations, and associations to improve processes and patient outcomes.	OEMS	1.1.4.1. Attend meetings of, and exchange knowledge with the National Association of State EMS Officials (NASEMSO). 1.1.4.2. Encourage appropriate state agencies and organizations to participate in meetings and activities hosted or sponsored by OEMS. 1.1.4.3. Collaboration among Air Medical Services (AMS) entities to ensure systems enhancements.
	1.1.5 Promote data sharing projects which benefit internal and external projects.	OEMS	1.1.5.1. Further data sharing, including the most recent version of National EMS Information System (NEMSIS), among the highway safety community, as well internal and external stakeholders. 1.1.5.2 Utilize the national EMS database to monitor national data trends. 1.1.5.3 Provide a means for VDH bio-surveillance programs to utilize Virginia Pre-Hospital Information Bridge (VPHIB) data.

Strategic Initiative 1.2 – Coordinate responses to emergencies both natural and man-made.			
	Objectives	Accountability	Action Steps
Core Strategy 1: Develop Partnerships	1.2.1 Support, coordinate and maintain deployable emergency response resources.	OEMS, VDEM	1.2.1.1. Create recruiting and selection process for resource management team. 1.2.1.2 Work with partner agencies to develop mission ready packages and the process for implementation and use.
	1.2.2 Increase knowledge of Emergency Operations capabilities with Emergency Managers, leaders, and supervisors on a local, regional, and state level.	OEMS	1.2.2.1. Continue to promote Emergency Operations resources, training courses, and abilities to localities across the Commonwealth.
	1.2.3 Assist EMS agencies to prepare and respond to natural and man-made emergencies (including pandemic diseases) by incorporating strategies to develop emergency response plans (the plan) that address the four phases of an emergency (preparedness, mitigation, response, and recovery) and to exercise the plan.	OEMS, VDEM	1.2.3.1. Create and promote planning templates aimed at EMS agencies, specifically related to COOP, Emergency Preparedness, and response concerns (MCI, Surge Planning, etc.)

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Strategic Initiative 2.1 - Sponsor EMS related research and education.			
	Objectives	Accountability	Action Steps
Core Strategy 2: Create Tools and Resources	2.1.1 Encourage research and other projects that contribute to high quality EMS and improve patient outcomes utilizing data collected by the EMS Registries.	OEMS	<p>2.1.1.1. Provide state and regional EMS data summaries, and compare with other similar state EMS data.</p> <p>2.1.1.2. Develop VSTR and VPHIB research data set to be available for entities upon request and that have obtained institutional review board approval.</p> <p>2.1.1.3. Support the development, implementation, and evaluation of evidence-based guidelines (EBGs) according to the National Prehospital EBG Model Process</p> <p>2.1.1.4. Promote standardization and quality improvement of prehospital EMS data by supporting the adoption and implementation of NEMSIS-compliant systems</p> <p>2.1.1.5. Improve linkages between NEMSIS data, VDH data warehouse and other databases, registries, or other sources to measure system effectiveness and improve clinical outcomes</p>
	2.1.2 Determine quality of EMS service and conduct analysis of trauma triage effectiveness.	OEMS, Designated Trauma Centers, TSO & MC, RC	<p>2.1.2.1. Trauma Performance Improvement Committee and/or EMS staffs will provide quarterly reports to the regional trauma committees via their representative on the Trauma System Oversight and Management Committee (TSO&MC) that identify over and under triage events due on the established schedule that OEMS staff submits its contribution to the EMS Quarterly Report to the EMS Advisory Board. The statewide version of this quarterly report shall be included in the quarterly report and posted on the OEMS Web site.</p> <p>2.1.2.2. Develop and implement OEMS component of VDH Data Warehouse (DW)</p> <ul style="list-style-type: none"> • Use DW to integrate VPHIB and Virginia State Trauma Registry (VSTR) • Use DW to access and integrate Virginia Health Information (VHI) and Vital Statistics data OEMS databases. • Provide agency-wide access to EMS data to be used in other public health efforts. <p>2.1.2.3. Use the DW to support bio-surveillance projects being performed within the VDH.</p>

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Strategic Initiative 2.1 - Sponsor EMS related research and education. (Cont.)			
	Objectives	Accountability	Action Steps
Core Strategy 2	2.1.3 Evaluate challenges that impact the workforce on service provision around the State.	OEMS, Workforce Development Committee (WDC), Virginia Association of Governmental EMS Administrators (VAGEMSA), Virginia Association of Volunteer Rescue Squads (VAVRS)	2.1.3.1. Assess demographic and profile characteristics of EMS Providers in Virginia through EMS Provider Portal. 2.1.3.2. Utilize EMS databases to evaluate information related to challenges that impact the workforce in the provision of EMS service.

Strategic Initiative 2.2 - Supply quality education and certification of EMS personnel.			
	Objectives	Accountability	Action Steps
Core Strategy 2: Create Tools and Resources	2.2.1 Ensure adequate, accessible, and quality EMS provider training and continuing education exists in Virginia.	OEMS, TCC, Regional EMS Councils	2.2.1.1. Widely publicize the availability of and ensure adequate, accessible and quality EMS provider training and continuing education through course offerings held across the state. 2.2.1.2. Review student disposition on a bi-annual basis, identifying areas of concern for Training and Certification Committee (TCC) input and possible corrective action. 2.2.1.3 Provide continued support for an annual multi-disciplinary EMS Symposium (i.e. Virginia EMS Symposium) as a primary statewide EMS system continuing education event.
	2.2.2 Enhance competency based EMS training programs.	OEMS, TCC, Medical Direction Committee (MDC)	2.2.2.1. Compare and contrast traditional versus competency based programs. 2.2.2.2 Identify and document aspects from competency based programs that directors feel enhance their programs as compared to the traditional approach.
	2.2.3 Align all initial EMS education programs to that of other allied health professions to promote professionalism of EMS.	OEMS, TCC, MDC, Board of Health Professions	2.2.3.1. Proactively promote Advanced Level EMT Training (AEMT)

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Strategic Initiative 2.2 - Supply quality education and certification of EMS personnel.			
	Objectives	Accountability	Action Steps
Core Strategy 2	2.2.4 Increase the amount and quality of pediatric training and educational resources for EMS providers, emergency department staff in Virginia.	OEMS, EMS for Children (EMSC) Committee, Virginia Hospital and Healthcare Association (VHHA)	2.2.4.1. Purchase and distribute pediatric training equipment for EMS agencies. 2.2.4.2. Sponsor pediatric training related instructor courses. 2.2.4.3. Provide support for speakers and topics at the annual VA EMS Symposium. 2.2.4.4 Participate in the National Pediatric Readiness Project.
	2.2.5 Assure an adequate amount and quality of geriatric training and educational resources for EMS providers, emergency department staff and primary care providers in Virginia.	OEMS, TCC, MDC	2.2.5.1. Sponsor geriatric training related instructor courses. 2.2.5.2. Provide support for speakers and topics at the annual VA EMS Symposium.
	2.2.6. Assure an adequate amount and quality of crisis/behavioral health training and educational resources for EMS providers.	OEMS, TCC, MDC, RC, Virginia Department of Behavioral Health and Developmental Services (VBHDS)	2.2.6.1 Coordinate and sponsor crisis/behavioral health courses for instructors and students throughout the Commonwealth. 2.2.6.2 Provide support for speakers and topics at the annual VA EMS Symposium.

Strategic Initiative 3.1 - EMS Regulations, Protocols, Policies, and Standards			
	Objectives	Accountability	Action Steps
Core Strategy 3: Develop Infrastructure	3.1.1 Review and assess state and federal legislation related to the EMS system.	OEMS, Rules and Regulations Committee, Legislation and Planning Committee	3.1.1.1. Review legislation to determine impact of legislation on VA EMS system. 3.1.1.2. Gather legislative news and interest items from NASEMSO, and National Association of EMS Physicians (NAEMSP), Federal Interagency Committee on EMS (FICEMS), and related organizations.
	3.1.2 Establish statewide Air/Ground Safety Standards.	OEMS, State Medevac Committee	3.1.2.1. Identify and adopt universal safety standards. 3.1.2.2. Maintain weather turn down system. 3.1.2.3. Establish standard safety protocols and training based on protocols. 3.1.2.4. Standardize air/ground safety standards. 3.1.2.5. Standardize Landing Zone procedures. 3.1.2.6. Maintain process for consistent use of air to air communication.
	3.1.3 Develop criteria for a voluntary Virginia Standards of Excellence Recognition Program for EMS Agencies.	OEMS, Workforce Development Committee	3.1.3.1. Promote and incentivize voluntary accreditation standards. 3.1.3.2. Implement and market program to interested agencies. 3.1.3.3. Evaluate efficacy of program based on feedback of EMS agency officials and Technical Assistance Teams.

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Strategic Initiative 3.1 - EMS Regulations, Protocols, Policies, and Standards (Cont.)			
Core Strategy 3: Develop Infrastructure	Objectives	Accountability	Action Steps
	3.1.4 Maintain and enhance the Trauma Center designation process.	OEMS, TSO & MC, EMSC	3.1.4.1. Maintain the trauma designation criteria to include American College of Surgeons (ACS) Trauma Center standards. 3.1.4.2. Conduct an analysis to determine the benefits of adding Level IV designation to the trauma care system, based on public need.
	3.1.5 Maintain and enhance the Regional EMS Council designation process.	OEMS	3.1.5.1. Evaluate the structure of the designation process. 3.1.5.2. Incorporate input of applicants and evaluators into next round of designations. 3.1.5.3. Conduct re-designation of councils.
	3.1.6 Establish standardized methods and procedures for the inspection and licensing and/or permitting of all EMS agencies and vehicles, including equipment and supply requirements.	OEMS, Transportation Committee	3.1.6.1. Development of standard inspection checklist, to include all aspects of agency and EMS vehicle inspection.
	3.1.7 Through a consensus process, develop a recommendation for evidence-based patient care guidelines and formulary.	OEMS, State EMS Medical Director, MDC, Board of Pharmacy.	3.1.7.1. Resource document being developed to assist regional medical directors, agency medical director and agency personnel as patient care guidelines and protocols are produced.

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Strategic Initiative 3.2 - Focus recruitment and retention efforts			
	Objectives	Accountability	Action Steps
Core Strategy 3: Develop Infrastructure	3.2.1 Develop, implement, and promote a comprehensive recruitment and retention campaign for EMS personnel and physicians, supporting the needs of the EMS system.	OEMS, State EMS Medical Director, MDC, Workforce Development Committee (WDC), Financial Assistance Review Committee (FARC), RC	3.2.1.1. Continue to support "VA EMS Jobs" website. 3.2.1.2. Develop and implement voluntary "Standards of Excellence" for EMS agencies. 3.2.1.3. Maintain Leadership & Management Track at the VA EMS Symposium, and recommend topics and presenters. 3.2.1.4. Continue to promote and support special Rescue Squad Assistance Fund (RSAF) applications related to recruitment and retention of EMS providers. 3.2.1.5 Review and promote the Operational Medical Director (OMD) Workshop Curriculum. 3.2.1.6 Support the transition of military EMS providers to civilian practice.
	3.2.2 Support and expand the Virginia Recruitment and Retention Network.	OEMS, WDC	3.2.2.1. Continue to support information and education for distribution. 3.2.2.2. Seek new avenues for EMS recruitment outreach. 3.2.2.3. Recommend strategies to expand existing programs and distribute to EMS stakeholders.
	3.2.3 Develop, implement, and promote EMS leadership programs, utilizing best practices.	OEMS, WDC	3.2.3.1. Develop and promote leadership programs to assist EMS agencies to provide high quality leadership to include all levels of the EMS Officer training program. 3.2.3.2. Develop and/or review leadership criteria and qualifications for managing an EMS agency. 3.2.3.3. Develop model job descriptions for EMS Officers. 3.2.3.4. Test efficacy of standards annually.

Strategic Initiative 3.3 – Upgrade technology and communication systems			
	Objectives	Accountability	Action Steps
Core Strategy 3	3.3.1 Assist with, and promote, the compliance of all emergency medical communications systems with state and federal regulations for interoperability.	OEMS, Communications Committee	3.3.1.1. Continue to ensure that all emergency medical communications systems meet state and federal regulations.
	3.3.2 Promote emergency medical dispatch standards and accreditation among 911 Public Safety Answering Points (PSAPs) in Virginia.	OEMS, Communications Committee	3.3.2.1. Support concept of accredited PSAPs, operating with emergency medical dispatch (EMD) standards, and assist agencies in achieving accreditation, and/or adopting EMD as standard operating procedure.

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Strategic Initiative 3.3 – Upgrade technology and communication systems (Cont.)			
	Objectives	Accountability	Action Steps
Core Strategy 3	3.3.3 Provide technical assistance on communication products available for use in the emergency medical community.	OEMS, Communications Committee	3.3.3.1. Support new products and technologies, state and federal interoperability initiatives, including First Net, and serve as information conduit to entities.

Strategic Initiative 3.4 – EMS Funding			
	Objectives	Accountability	Action Steps
Core Strategy 3: Develop Infrastructure	3.4.1 Standardize EMS grant review and grading process by graders at regional and state level.	OEMS, FARC	3.4.1.1. Revise RSAF grant review sheet developed by FARC and OEMS Staff, and continue to evaluate for efficacy. 3.4.1.2. Solicit and consider concerns/comments of regional EMS councils/stakeholders regarding the grant process.
	3.4.2 Explore feasibility of creating EMS consortium for purchase of EMS equipment and supplies.	OEMS, FARC, Transportation Committee	3.4.2.2. Collaborate with DGS and other stakeholders in developing a resource guide, and distribute to potential grant applicants.
	3.4.3 Develop uniform pricing schedule for state funded items.	OEMS, FARC	3.4.3.1. Determine items that can be standardized. 3.4.3.2. Distribute schedule to potential grant applicants.
	3.4.4 Develop standard specifications for state grant funded equipment awarded to eligible non-profit EMS agencies.	OEMS, FARC, VDH Office of Purchasing and General Services	3.4.4.1. Develop and maintain list of eligible equipment and vehicles that agencies are eligible to purchase using state grant funds. 3.4.4.2. Utilize standard equipment and vehicle lists for future grant applications and cycles.
	3.4.5 Assist EMS agencies to identify grant programs and funding sources for EMS equipment, training, and supplies.	OEMS, FARC	3.4.5.1. Continue to promote RSAF program through Regional EMS Councils. 3.4.5.2. Identify grant opportunities that EMS agencies may be eligible for, and distribute information to EMS system.
	3.4.6 Integrate state grant funding programs with other related grant funding programs.	OEMS, FARC	3.4.6.1. Continue to seek federal and other grant funds for items intended to improve the statewide EMS system.
	3.4.7 Develop guidance documents to assist EMS agencies account for the use of state grant funds and develop internal audit processes.	OEMS, FARC	3.4.7.1. Work with contracted audit firms and Office of Internal Audit to create reference documents to assist agencies to account for grant funds, and ensure sound auditing practices.

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Strategic Initiative 3.5 – Enhance regional and local EMS efficiencies			
	Objectives	Accountability	Action Steps
Core Strategy 3	3.5.1 Standardize performance and outcome based service contracts with designated Regional EMS Councils and other qualified entities.	OEMS, RC	3.5.1.1. Maintain annual service contracts with Regional EMS Councils. 3.5.1.2. Provide standard contracts, plan templates, and other reference documents to Regional EMS Councils in each fiscal year. 3.5.1.3. Provide input on contract deliverables to Regional EMS Councils on a quarterly basis.
	3.5.2 Improve regulation and oversight of air medical services (AMS) statewide.	OEMS, State Medevac Committee, Rules & Regulations Committee, MDC	3.5.2.1. Revise/implement state AMS regulations. More clearly define licensure requirements for AMS agencies. 3.5.2.2. Establish response areas for AMS agencies. 3.5.2.3. Develop criteria for ongoing AMS PI program.
	3.5.3 Educate local government officials and communities about the value of a high quality EMS system to promote development in economically depressed communities and the importance of assuming a greater responsibility in the planning, development, implementation, and evaluation of its emergency medical services system.	OEMS, WDC, Virginia Office of Minority Health and Health Equity (OMHHE)	3.5.3.1. Give presentations at Virginia Association of Counties (VACO) and Virginia Municipal League (VML) meetings, to educate local government officials about EMS. 3.5.3.2. Contribute EMS related articles and news items to periodic publications of VACO and VML.

Strategic Initiative 4.1 – Assess compliance with EMS performance driven standards.			
	Objectives	Accountability	Action Steps
Core Strategy 4	4.1.1 Maintain statewide data-driven performance improvement process.	OEMS, MDC	4.1.1.1. Utilize VDH resources to conduct risk adjusted data analysis of patients in cooperation with our stakeholders. 4.1.1.2. Develop an EMS performance improvement program.
	4.1.2 Maintain statewide pre-hospital and inter-hospital triage/patient management plans.	OEMS, TSO & MC, State EMS Medical Director, MDC, RC	4.1.2.1. Maintain statewide stroke triage, and trauma triage plans to include regional plan development and maintenance by regional EMS councils. 4.1.2.2. Supply state level data to assist with monitoring individual regional performance compared to state and national benchmarks. 4.1.2.3. Actively participate with organizations, such as American Heart Association (AHA) that addresses pre-hospital and inter-hospital triage/patient management.

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Strategic Initiative 4.1 – Assess compliance with EMS performance driven standards. (Cont.)			
Objectives		Accountability	Action Steps
Core Strategy 4: Assure Quality and Evaluation	4.1.3 Review and evaluate data collection and submission efforts.	OEMS, MDC	4.1.3.1. Develop standard reports within VPHIB that will allow individual EMS agencies to view the quality of data being submitted. 4.1.3.2. Provide quality “dashboards” where education can improve data quality and update validity rules within the application when education alone cannot correct poor data. 4.1.3.3. Provide quarterly compliance reports to the OEMS, Division of Regulation and Compliance and Executive Management.
	4.1.4 Review functional adequacy and design features of EMS vehicles utilized in Virginia and recommend changes to improve EMS provider safety, unit efficiency and quality of patient care.	OEMS, Rules & Regulations Committee, Transportation Committee, Health & Safety Committee	4.1.4.1. Evaluation of national/international documents and information related to vehicle and provider safety, with potential incorporation into EMS regulation and inspection procedure.
	4.1.5 Measure EMS system compliance utilizing national EMS for Children (EMSC) performance measures.	OEMS, EMSC	4.1.5.1. Continue to assess the pediatric emergency care readiness of Virginia Emergency Departments.

Strategic Initiative 4.2 – Assess and enhance quality of education for EMS providers.			
Objectives		Accountability	Action Steps
Core Strategy 4: Assure Quality and Evaluation	4.2.1 Update the certification process to assure certification examinations continue to be valid, psychometrically sound, and legally defensible.	OEMS, TCC	4.2.1.1. Review and revision of psychomotor examination by TCC as needed. 4.2.1.2. Review statistical data and make recommendations for the EC recertification exam.
	4.2.2 Assure adequate and appropriate education of EMS students.	OEMS, TCC, Atlantic EMS Council (AEMS)	4.2.2.1. Review state statistics for certification rates and assist in determining avenues to improve outcomes and implement new processes. 4.2.2.2. Improve instructor compliance with student registration process.
	4.2.3 Explore substitution of practical examination with successful completion of a recognized competency based training program conducted by accredited training sites and using computer based technology for written examinations.	OEMS, TCC	4.2.3.1. Explore possibility of administering a program summative practical exam in lieu of state practical exam.

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Strategic Initiative 4.3 – Pursue initiatives that support EMS			
Objectives		Accountability	Action Steps
Core Strategy 4: Assure Quality and Evaluation	4.3.1 Engage the EMS system in unintentional injury, illness, and violence prevention efforts.	OEMS, Health & Safety Committee, VDH – Div. of Injury and Violence Prevention	4.3.1.1. Participate in intentional and unintentional injury and illness prevention initiatives, and facilitate involvement for EMS agencies and providers. 4.3.1.2 Review VPHIB statistics regarding Line of Duty Death (LODD) and Line of Duty Injury (LODI), and develop prevention materials.
	4.3.2 Develop, implement, and promote programs that emphasize safety, health and wellness of first responders.	OEMS, TCC, MDC, Virginia Department of Behavioral Health and Developmental Services (DBHDS), VDFP, Virginia Fire Chiefs Association (VFCA), VAVRS, VAGEMSA, Virginia Professional Firefighters (VPFF), National Fallen Firefighters Foundation (NFFF), RC	4.3.2.1. Maintain OEMS staff support of quarterly meetings of the Health and Safety Committee of the state EMS Advisory Board. 4.3.2.2 – Identify, develop, and distribute safety, health and wellness programs aimed at first responders, such as Traffic Incident Management, and suicide prevention, and EMS fatigue. 4.3.2.3. Ensure Health, Safety, and wellness training is available at stakeholder conferences, and recommend topics and presenters. 4.3.2.4. Maintain Governor’s EMS Award category for contribution to the EMS system related to the health and safety of EMS providers.
	4.3.3. Research and disseminate information on best practices as it relates to EMS response to active shooter and hostile environment incidents.	OEMS, Health & Safety Committee, State EMS Medical Director, VSP, VDFP, RC	4.3.3.1 Develop and maintain website providing information on best practices related to response procedures, policies, team equipment, and other issues related to EMS involvement in active shooter/hostile environment response. 4.3.3.2 – Work with partner agencies to encourage public safety relationships at the local level to enhance response to active shooter/hostile environment incidents.
	4.3.4. Research and disseminate information on best practices as it relates to community risk reduction programs targeted toward improving population health.	All EMS Stakeholder groups	4.3.4.1 Develop partnerships with public and private entities to expand opportunities to improve population health. 4.3.4.2 Develop and promote programs, such as mobile integrated healthcare, targeted toward improving population health.

VIRGINIA OFFICE OF EMS STATE STRATEGIC AND OPERATIONAL PLAN

Appendix C – Sample Planning Matrix

	Strategic Initiative		
	Objectives	Accountability	Action Steps
Core Strategy			

Appendix D – Glossary of Terms

Glossary of Terms

Action Step: A specific action required to carry out an objective.

Core Strategy: A main thrust or action that will move the organization towards accomplishing your vision and mission.

Operational Plan: This is the plan that implements the strategic intent of the organization on an annual basis.

Objective: A specific, realistic and measurable statement under a strategic initiative.

Strategic Initiative: An action that will address areas needing improvement or set forth new initiatives under the core strategy. This is the planning part of strategy that when combined with the vision, the mission and core strategies complete the strategic effort.

SWOT Analysis: An assessment of the internal strengths and weaknesses of the organization and the organization's external opportunities and threats.

Template: A guide and/or format that assists the user in accomplishing a task efficiently in a uniform and consistent manner.

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Appendix E - Resources

Resources

In developing this plan several resources were used in addition to meetings and interviews with OEMS staff and many system stakeholders.

- Code of Virginia: § 32.1-111.3. Statewide emergency medical care system. Requires a comprehensive, coordinated EMS system in the Commonwealth and identifies specific objectives that must be addressed.
- EMS Agenda for the Future: A document created by the National Highway Traffic and Safety Administration (NHTSA) that outlines a vision and objectives for the future of EMS. August 1996
- OEMS 3-Year Plan: July 1, 2013-June 30, 2016
- Service Area Strategic Plan State Office of Emergency Medical Services (601 402 04) which describes the statutory authority and expectations for OEMS and identifies the growing EMS needs of the citizens and visitors of Virginia.
- Service Area Strategic Plan Financial Assistance for Non Profit Emergency Medical Services Organizations and Localities (601 402 03) This service area includes Virginia Rescue Squads Assistance Fund grants program, Financial Assistance to Localities to support Non Profit Emergency Medical Service (EMS) agencies, and funding provided to support Virginia Association of Volunteer Rescue Squads (VAVRS).
- State Emergency Medical Services Systems: A Model: National Association of State EMS Officials – July 2008
- EMS at the Crossroads: Institute of Medicine – 2006
- Agency Planning Handbook: A Guide for Strategic Planning and Service Area Planning Linking to Performance-Based Budgeting: Department of Planning and Budget 2006-2008 Biennium, May 1, 2005
- Joint Legislative Action Review Commission (JLARC) Report – House Document 37, Review of Emergency Medical Services in Virginia. 2004.
- EMS Advisory Board Committee Planning Templates – Revised 2016
- Regional EMS Council Process Action Team (PAT) Retreat Report - November 2008.
- Five-Year Strategic Plan – Federal Interagency Committee on EMS – December 2013